

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	<i>6/20/10</i>
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>20816</i>	<i>6/24/10</i>
FORMALITY REVIEW	<i>RE</i>	<i>60105</i>	<i>08-09-10</i>
RESPONSE FORMALITY REVIEW	<i>H</i>		<i>10-29-10</i>

INDEX OF CLAIMS

✓ Rejected* N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	7/2
2	24/11
3	03/04
4	✓
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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